APPLICATION DATA SHEET

Application Information

The first time than the

Application Number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	•
CD-ROM or CD-R?::	
Number of CD Disks::	•
Number of Copies of CDs::	
Sequence Submission?::	No
Computer Readable Form (CRF)?::	
Number of Copies of CRF::	
Title::	Ovarian Hormone Induced Neural Stem Cell
	Increase
Attorney Docket Number::	032901-044
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	·
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	

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Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Canada

Status::

Full Capacity

Given Name::

Samuel

Middle Name::

Family Name::

Weiss

Name Suffix::

City of Residence::

Calgary

State or Province of Residence::

Alberta

Country of Residence::

Canada

Street of Mailing Address::

4540 Chapel Road, N.W.

City of Mailing Address::

Calgary

State or Province of Mailing Address:: Alberta

Country of Mailing Address::

Canada

Postal or Zip Code of Mailing

Address::

T2L 1A6

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Japan

Status::

Full Capacity

Given Name::

Tetsuro

Middle Name::

Family Name::

Shingo

Name Suffix::

City of Residence::

Calgary

State or Province of Residence::

Alberta

Country of Residence::

Canada

Street of Mailing Address::

D-13 4591 37th Street

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State or Province of Ma Country of Mailing Addr	City of Mailing Address::			Calgary			
Country of Mailing Addr	State or Province of Mailing Address::						
Country of Maining Addi	Canada						
Postal or Zip Code of M	lailing						
Address::		T2L 2J5					
Correspondence In	nformation						
Correspondence Custon	mer Number::	21839					
Phone Number::		(650) 622-2300					
-Fax-Number:		(650) 622-2499					
Representative Info	ormation	·					
Representative Info		21839					
-		21839					
-	er Number::	21839	·		_		
Representative Custom	er Number::		Pare	nt	Parent Filing		
Representative Custom Domestic Priority I	er Number::			nt cation::	Parent Filing Date::		
Representative Custom Domestic Priority I	er Number::	/ Type::	Appl				
Representative Custom Domestic Priority I	er Number:: nformation Continuity	/ Type::	Appl	cation::	Date::		
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Representative Custom Domestic Priority I	er Number:: nformation Continuity	/ Type::	Appl	cation::	Date::		
Representative Custom Domestic Priority I	er Number:: nformation Continuity Non-Provis	/ Type::	Appl	cation::	Date::		
Representative Custom Domestic Priority II Application::	er Number:: nformation Continuity Non-Provis ormation	/ Type::	Appl	cation::	Date::		

Assign Information

Assignee Name::

Neurostasis, Inc.

Street of Mailing Address::

240, 1167 KENSINGTON CRESCENT N.W.,

City of Mailing Address::

CALGARY

State or Province of Mailing Address:: ALBERTA

Country of Mailing Address::

CANADA

Postal or Zip Code of Mailing

T2N 1X7

Address::

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